THE COVID-19 FRAUD
& WAR ON HUMANITY

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CONTENTS

Abstract 3

PART ONE

The globalist agenda 4

The Trojan Horse 8

Virology’s double deception 9

The four pillars of the COVID-19 fraud 10

The first pillar: Isolation 11

PART TWO

The second pillar: Genomic sequencing 19

The third pillar: PCR 22

The fourth pillar: Outbreak modelling 28

PART THREE

In summary 32

Conclusion 33

POSTSCRIPT

Crimes against humanity 36

The final insult 45

About the authors 46
THE COVID-19 FRAUD & WAR ON HUMANITY

Abstract

COVID-19 is a fraud because its alleged causal agent, a purported novel coronavirus called SARS-CoV-2, has not been proven to exist in nature and therefore has not been established as the cause of COVID-19, the disease and pandemic invented by the World Health Organisation (WHO). For the selfsame reason there are no variants of the “virus”, which likewise exist only hypothetically in computers, cloud-based gene banks and in the minds of innocent people who have been comprehensively gulled by their governments.

The COVID-19 fraud, with its numerous preposterous claims, constitutes nothing less than a war on humanity by organisations such as Anser, Fors Marsh, and Palantir that conduct the scam through Big Pharma, with its backers and enablers, including the World Economic Forum, the Bill and Melinda Gates Foundation, the WHO, technology conglomerates, the mainstream media, complicit governments, and COVID “pirates” such as UNC Chapel Hill and Imperial College London, to a one beneficiaries of the fraud.

COVID-19 is a war on humanity because politicians and their governments continue to use this imaginary disease to terrorise and imprison their citizens, denying them guaranteed human rights and freedoms, and violating their once inviolable bodies with highly experimental and hazardous injections that contain a computer-generated spike protein mRNA sequence that instructs the body to poison itself. These nefarious injections, which also contain undeclared non-biological objects for undeclared purposes, are injuring millions and killing thousands of people around the world, including up to 245 New Zealanders as at 5 November 2021.1

A virological fraud lies at the heart of these crimes against humanity – that SARS-CoV-2 has never been physically isolated or shown to be the aetiological (causal) agent of COVID-19. In this article, the authors examine the illusory world of virology to explain how a virus that no one has seen or knows where it has come from, that no one knows what it does or where it is going, is, according to the fraudsters, stealing across borders and boundaries and coming to get you no matter where you are. How can it be, the authors ask, that this phantasmagorical madness has morphed into a world redolent with fear in which democratic governments have abandoned democratic principles to engage in the control and “deletion of human beings” that may be just a “variant” away from turning into World War III?2

1 Dr Arne Burkhardt, Dr Walter Lang, Dr Werner Bergholz, “Cause of death after Covid-19 vaccination”, Press Conference, Institute of Pathology, Reutlingen, Germany, (20 Sep 21), 1:27:20: https://rivercitymalone.com/health/pathologists-investigate-deaths-after-covid-vaccination/. As at 25/9/21 a total of 2,448,262 adverse events and 26,041 deaths had been reported to the European Medicines Agency (Europe); as at 15/9/21 a total of 1,204,555 adverse events and 1,662 deaths had been reported to Yellow Card (UK); as at 1/10/21 a total of 2,826,646 adverse events and 16,310 deaths had been reported to VAERS (US). Total reported adverse events for these three regions are 6,479,563 and total deaths are 44,013. Given the known under-reporting of such events, it is anticipated that the actual numbers could be at least five-fold higher. See: America’s Frontline Doctors et al. v Xavier Becerra, Secretary of the U.S. Department of Health and Human Services, et al., Civil Action No. 2:21-cv-00702-CLM, filing 19 July 2021, 41; NZ Citizen’s adverse events database: https://docs.google.com/spreadsheets/d/1EXQRRGzccxqFL6txrQgGC_Xp7Gb0LbCF3LyszFBA/edit#gid=1156802649
PART ONE

THE GLOBALIST AGENDA

Make no mistake, we are currently being assailed by a worldwide fraud of such scale and malevolence that it threatens our very existence as we know it on this planet.

The fraud concerns a purported novel coronavirus, invented not found by virology, which allowed Bill Gates to predict a once-in-a-century pandemic requiring billions of vaccines to combat, by which he meant to vastly increase the assets of the Bill and Melinda Gates Trust that sits alongside the Bill and Melinda Gates Foundation (BMGF).

Another who was eagerly preparing for the deployment of mass “vaccines”, which are not vaccines but bio-weapons, was Peter Daszak of EcoHealth Alliance. As he said in 2015, “we need to increase public understanding of the need for MCMs [Medical countermeasures] such as a pan-influenza or pan-coronavirus vaccine. A key driver is the media, and the economics follow the hype. We need to use that hype to our advantage to get to the real issues. Investors will respond if they see profit at the end of process.”

In September 2019, the Global Preparedness Monitoring Board, a creation of the WHO and the World Bank, advised countries to prepare for a potential “lethal respiratory pathogen” by investing in “innovative vaccines and therapeutics, surge manufacturing capacity, broad-spectrum antivirals and appropriate non-pharmaceutical

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interventions." They further advised that “all countries must develop a system for immediately sharing genome sequences of any new pathogen.”

The world was being prepared for a “pandemic” and on December 4, 2019, Dr Anthony Fauci, Director of the National Institute of Allergy and Infectious Diseases stated that his agency was "conducting and supporting research to develop state-of-the-art vaccine platform technologies that could be used to develop universal influenza vaccines as well as to improve the speed and agility of the influenza vaccine manufacturing process. These platform technologies include DNA, messenger RNA (mRNA), virus-like particles, vector-based, and self-assembling nanoparticle vaccines." Everything was thus set to release genetic and nanoparticle technologies onto unsuspecting populations under the guise of a health crisis just a few weeks away. All it took was the substitution of influenza, which had long since failed to strike fear into the world, with an imaginary deadly and “novel” coronavirus.

The events that have transpired over the last 20 months would have seemed inconceivable even two years ago, except in the minds of people like Gates and Klaus Schwab, founder and Executive Chairman of the World Economic Forum, who had already conceived of destroying democracy from within with a self-destructive response induced by fear of such a virus. As Schwab wrote in The Great Reset, sowing the seeds of his global agenda: “Since making its entry on to the world stage, COVID-19 has dramatically torn up the script of how to govern countries, live with others and take part in the global economy.” It was an extraordinary claim for a coronavirus that was so “novel” that spike protein sequences were already being patented by their inventors and, in the case of US Patent 7279327 B2, assigned to The University of North Carolina Chapel Hill, USA, in 2007, and allegedly provided to Moderna in

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6 Ibid.


November 2019, a month before COVID-19 leapt onto the world stage in Wuhan.\(^9\) It is a song Schwab loves singing with Thierry Malleret: “The worldwide crisis triggered by the coronavirus pandemic has no parallel in modern history. We cannot be accused of hyperbole when we say it is plunging our world in its entirety and each of us individually into the most challenging times we’ve faced in generations. It is our defining moment – we will be dealing with its fallout for years, and many things will change forever.”\(^10\) The globalist chorister, the former New Zealand Prime Minister, Helen Clark, Co-Chair of the WHO’s Independent Panel for Pandemic Preparedness & Response, sings from the same hyperbolical song sheet: “In less than a year and a half, COVID-19 has infected at least 150 million people and killed more than three million. It is the worst combined health and socioeconomic crisis in living memory, and a catastrophe at every level … COVID-19 is the 21st century’s Chernobyl moment — not because a disease outbreak is like a nuclear accident, but because it has shown so clearly the gravity of the threat to our health and well-being. It has caused a crisis so deep and wide that presidents, prime ministers and heads of international and regional bodies must now urgently accept their responsibility to transform the way in which the world prepares for and responds to global health threats.”\(^11\)

These preposterous and unsubstantiated claims from the globalists provide a chorus of fear on which the pharmaceutical companies such as Pfizer rely to extract vast sums of money from nation-states that sell out their people for a song. This extortive practice is the basis of the leaked manufacturing and supply agreement between Pfizer and Albania, whereby the former required the latter to accept that the Pfizer “vaccine” was subject to “significant risks and uncertainties”, that it “may not be successful due to” a wide range of reasons, and that Pfizer has “no liability for any

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failure ... to develop or obtain Authorization of the Product in accordance with the estimated dates described in this Agreement.”

Behind the “decoys”, as David Martin describes the main pharmaceutical players – Pfizer, Moderna, Johnson & Johnson, Merck Ridgeback, Gilead Sciences – sit the state-sponsored felons, the “privateers”: Anser, “the largest contractor in the entire COVID terrorism campaign” managing Operation Warp Speed; Fors Marsh, the branding agency that branded COVID-19 and is responsible for ensuring the COVID-19 messaging is the same around the world; Peter Thiel’s Palantir, which tracks you by phone wherever you are through Gotham Data Tracking; and Publicis Sapient, which coordinates all the COVID-19 data and tells the world how many COVID cases there are, despite there being no COVID cases to count. Then there are the pirates, among whom may be numbered: Ralph Baric and his Chimera Laboratory at the University of North Carolina Chapel Hill, recipient of over $100 million since 1999 to weaponise the particles of coronavirus, including $28 million from Anthony Fauci’s National Institute of Allergy and Infectious Diseases (NIAID) to weaponise the spike protein; Vanderbilt; Emory; Johns Hopkins University; University of California System; Massachusetts Institute of Technology; New York University Langone; German Centre for Infection Research; Imperial College London; Institute for Health Metrics and Evaluation; and Erasmus.

The go button was pushed on this globalist fraud when a 41-year-old worker presented at the Central Hospital of Wuhan on 26 December 2019 with symptoms indistinguishable from other respiratory illnesses commonplace among the 11 million residents who endure suffocating pollution in the capital of China’s Hubei Province. Lickety-split, the genome of a virus no one had seen let alone isolated and purified, was published in early January 2020, renamed SARS-CoV-2 by the International

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Committee on Taxonomy of Viruses on 11 February, the same day the fraud’s chief conductor, the WHO’s Director-General, Tedros Adhanom Ghebreyesus (Tedros), announced its consequent companion: “we now have a name for the disease: COVID-19. I’ll spell it: C-O-V-I-D hyphen one nine – COVID-19.”

By the end of March 2020, democracy was on its knees, the people as the People excluded from public life, imprisoned in their homes, accepting their fate in the same tragic silence as the sad-eyed of the Shoah, packed into boxcars, rolled across a grey-scale landscape to a fate worse than death. The camps of exclusion were now our homes. And then the unthinkable: politicians announced that they would be inoculating their populations with highly experimental genetic encoded injections never before used on humans that still had years to run on their already truncated and farcical clinical trials. Our elected representatives didn’t bother to tell us that. They also didn’t tell us that those who seemed to tolerate the initial inoculation may be carrying in their bodies ticking time bombs of potential neurodegenerative and autoimmune diseases as well as undeclared non-biological objects for undeclared purposes.

THE TROJAN HORSE

> Everything turns on these two concepts: absence and presence. Of what is SARS-CoV-2 predicated: absence or presence? That is the question we must must decide. For without the instantiated presence of SARS-CoV-2 there are no COVID-19 cases to count, and therefore no ground or justification for any government’s response to a phantom pandemic.

This assault on humanity relies on a trojan horse to deliver the fraud into our minds and bodies, making possible the fulfilment of the globalist agenda of a population

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16 Paul D Thacker, “Covid-19: researcher blows the whistle on data integrity issues in Pfizer’s vaccine trial”, BMJ, 375/n2635 (2 Nov 21), 1-3: https://www.bmj.com/content/375/bmj.n2635
control grid with the apparent ultimate aim of controlling populations in every way possible.\(^\text{18}\)

While debates go on around the world regarding the origins of COVID-19, the latest case numbers, its lethality, and the effectiveness of the so-called vaccines, the participants in these debates seem to take something for granted: that a virus actually exists. The vast majority of the public and the medical profession are unaware that the trojan horse is modern virology and its anti-scientific methods that assert the existence of viruses such as SARS-CoV-2. Most would be surprised to learn that the “virus” has never been found inside a single human or shown to be the cause of any disease.

**VIROLOGY’S DOUBLE DECEPTION**

The COVID-19 crime against humanity requires the absence of this virus so there is no material reference against which the make-believe genome can be cross-checked, to establish, for instance, whether or not the purported SARS-CoV-2 proteins specifically stem from the alleged virus.

This illusory trick relies on virology's double deception: (a) the substitution of the dictionary and scientifically postulated meaning of the noun *isolation* for its opposite; and (b) the substitution of the fake proxy of inducing cytopathic effects (CPEs) by inoculating typically abnormal cell lines *in vitro* for the postulated proxy of infecting a healthy or non-diseased host *in vivo* to establish causality between the purported pathogen and the disease. However, even using “normal” cell lines would not establish causality by Koch’s postulates or any other scientific postulates, as they are simply test tube observations involving alleged viruses.

This double deception constitutes a violation of postulates on which the scientific community has long depended. This physical absence makes of SARS-CoV-2 a fail-safe

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[https://odysee.com/@corbettreport:0/gatespopulation:b](https://odysee.com/@corbettreport:0/gatespopulation:b)
fraud, one that industry-funded virologists applaud and one that the medico-pharmaceutical complex both exploits and rewards. So obscure is this black art and so arcane its language that few among the general public would stop to question it. Even Stephen Bustin, Polymerase Chain Reaction (PCR) expert and creator of the MIQE protocols designed to tame the RT-PCR “Wild West”, falls for this virological fraud, as he revealed in his interview with Eric Coppolino:

Eric Coppolino (EFC): But there’s two different definitions of isolation going around though. One is that you separate it from all else, and the other is that you put it into a broth and you find it.

Stephen Bustin (SB): Yeah. Well, that’s not really my area of expertise. As far as I’m concerned, I’ve read the papers and if that’s the standard way of isolating a pathogen, so I have no problems with that.

EFC: Well, it’s the current way that’s used, I would say, that the idea of true purification you separate it into centrifuge, and you know you’ve got a sample of only that. And then that is the thing that is sequenced and then used to prime the PCR. It does not appear that that’s what’s happening ...

SB: Well, the way the sequence was established by taking the samples from the original patient growing up something and then sequencing it and then disassembling the sequence and what came out of that was the SARS virus. Which then very closely resembled a bat SARS virus. And was obviously a different one. So, that ... Well, you know, this is a standard way of doing this so I really can’t comment any further on that, except that to me that’s perfectly acceptable and that’s the way to do it.

FOUR PILLARS OF THE COVID-19 FRAUD

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19 NB: Bustin was mistaken in his recollection. As we discuss below, this invalid step was not taken by the inventors of SARS-CoV-2.
There are four pillars to the worldwide COVID-19 fraud, all of which are interlocking.

**THE FIRST PILLAR: ISOLATION**

The theory of disease-causing viruses dates back to the 1800s and virologists spent the first half of the 20th century trying to extract these suspected viruses directly from living hosts. The repeated failures led them to change course in the 1950s in order to retain any credibility. The virologists had to provide something to show their potential funders, including the growing pharmaceutical industry chomping at the bit to develop vaccines and anti-microbial drugs.

In 1954, scientists reported that they had evidence of the measles virus based on the observation that a sample from a measles patient had killed some cells in a test tube. These appearances are known as “cytopathic effects”. The authors admitted that “while there is no ground for concluding that the factors in vivo [in a human] are the same as those which underlie the formation of giant cells and the nuclear disturbances in vitro [in the test tube], the appearance of these phenomena ... might be associated with the virus of measles.”

The appearance of CPEs is foundational to modern virology’s fraudulent claims of isolation and pathogenicity: a sample (e.g., a nose swab) is taken from a patient and mixed with some cells in a test tube, the cells die, and it is declared that a virus has been “isolated”. What virologists don’t want you to know is that the same appearances can be generated without adding purported virus samples to the test

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23 Ibid., 287.
tube – in other words, it is the process itself, starvation of the cell and the addition of various toxic substances such as antibiotics and antifungals, that cause the already abnormal cell lines to react and die, no virus required. (Sometimes photographs of “mock” infections are provided, however the details of these experiments are conspicuous by their absence.)

There are, of course, the images of what are claimed to be the virus causing all our problems. However, the colourful 3D images are nothing more than computer generated images representing an artist’s impression. They have been used by media around the world to fuel the imaginations of the public that a tiny microbe that looks like a sea mine that could hit then sink them at any time. As for the electron micrograph images put forward in the scientific publications, these simply

![Diagram](https://www.qwant.com/?client=brz-brave&q=SARS-CoV-2+images&t=images)

Figure 1. “Cytopathic Effects – no virus required”

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24 [https://www.qwant.com/?client=brz-brave&q=SARS-CoV-2+images&t=images](https://www.qwant.com/?client=brz-brave&q=SARS-CoV-2+images&t=images)

25 Stefan Lanka, "The Virus Misconception", WISSEnSCHAFFTPLUS magazin, 01/2020, 4.
show nano-particles in and around culture cells as described in the laboratory experiments above. They are alleged to be the SARS-CoV-2 viruses based on arbitrary declarations. By definition, a virus is an infectious particle that can cause a disease in a living host. None of these key properties has been demonstrated in any of the virological experiments describing purported isolation and pathogenesis.

Virologists spent decades attempting this unsuccessfully and instead of admitting there might be a problem with the whole virus theory, they simply changed the meaning of the word. This is a scandalous state of affairs. The world is currently being held to ransom because virologists do not actually isolate viruses, they just say that they do, and appear not to be troubled that the current assault on humanity relies on this self-evident scientific fraud.

The first and foundational fraud is the claim that the virus has been isolated and is the aetiological (causal) agent of COVID-19. Without acceptance of this (always unsubstantiated) claim, the COVID-19 fraud would implode, as would Gates’s “once-in-a-century pandemic”. In other words, the fraud of isolation relies on the violation of accepted meaning to deceive, when, for instance, an “isolate” has no more been isolated than a wishful thought. This sets up a viciously circular discourse from which there is no escape: the premise of existence is established by the lie, and through its absolute insistence, existence of the virus is conclusively and repeatedly “confirmed”. Virology thrives on this insistence, for without it, there is no virus, no virology, no “positive” PCR “tests”, and no more jobs for virologists inventing viruses for Big Pharma to fight with miraculous “vaccines”. That is also why ideas that run counter to this narrative are censored by the government and by the mainstream media, and why this country’s security agencies are terrorising the people they claim to be protecting, enforcing upon them the virological fraud on which the whole charade depends. The entire state apparatus is currently dedicated to this cause.

Fan Wu et al.26

Rather than using the method widely used by virologists for claiming isolation and pathogenicity through inducing CPEs, Fan Wu et al., the first inventors of the SARS-CoV-2 genome, sent the sample extracted from the patient’s lung fluid straight to sequencing for two de novo assembly platforms to search for short genetic fragments or “reads”\(^{27}\). It is important to note that the samples sent for sequencing were not physically isolated viruses but crude samples containing millions of unique genetic fragments from the patient himself, innumerable microbes, even from the air the patient had breathed on the way to the hospital. Over 56.5 million reads were produced from this genetic “soup” and pieced together to create 384,096 contigs (long genetic sequences) on Megahit, and 1.32 million contigs on Trinity\(^{28}\). Perhaps with a predisposition to prove their unproven canard that there is “the ongoing ability of viral spill-over from animal to cause severe disease in humans”, Fan Wu et al. chose the longest (30,474 nucleotides), which, they claimed, had a nucleotide identity of 89.1% with the in silico bat coronavirus genome (SL-CoVZC45) invented in 2018\(^{29}\). Thus, a “genome” that was as close genetically as a human is to an Abyssinian house cat became the template used for primer design for the RT-PCR method to supposedly detect a virus that had not been shown to exist\(^{30}\). Subsequently, it was decided that the genome needed a cut and paste, perhaps to make it look even closer to the 29,802 nucleotides of the bat model SL-CoVZC45 and it was reduced to 29,875 nucleotides in the next version on GenBank\(^{31}\). But the artists weren’t finished with their creation and a third and final model was drawn with a completely different terminal sequence featuring 23 consecutive adenine bases, which, hey presto, looked more like the bat model that featured 26 consecutive adenine bases on its tail\(^{32}\). It is unclear how the

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\(^{28}\) Ibid. Megahit and Trinity are the names of two de novo assembly platforms.

\(^{29}\) Ibid., 265-6, Methods page.

\(^{30}\) Joan Pontius et al., “Initial sequence and comparative analysis of the cat genome”, Genome Research, 17 (2007), 1680.


virologists knew which “genome” to choose when all of the options were hypothetical computer constructs. It thus quickly becomes apparent that the anti-science of virology and the perversion of the word “isolation” is not only delusional but also highly misleading and no basis for anything, let alone the health and well-being of whole populations.

One year later, Dr Wu Zunyou of the China CDC, in an interview with Janis Mackey-Frayer, would state that isolation had never taken place: “They didn’t isolate the virus”, he said. “That’s the issue [why no data has been shared]. I do not suspect it’s coming from what we originally thought.”

This foundational fraud was rewarded with grants in 2020 totalling US$900,000 from the Bill and Melinda Gates Foundation made to the two institutions with which 14 of the 19 co-authors of the fraud were affiliated: Fudan University received a grant under INV-006277 “to support the epidemiology study and identify the high risks of COVID-19 infection, which will contribute to national and international public health intervention strategy and product development”, totalling US$300,000; and the China CDC received a grant under INV-005832 “to support emergency response and evaluation, and prepare China for the potential pandemic, which will not only help disease control and containment but contribute China’s experience to global health”, totalling $600,000.

**Peng Zhou et al.**

Similar pseudo-scientific methods and the same false claim of isolation are found in the paper of Peng Zhou et al., received by *Nature* 13 days after Fan Wu et al.’s but

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published online in the same volume, 579, on the same day, 3 February 2020. These authors likewise claim successful isolation of what they call “2019-nCoV BetaCoV/Wuhan/WIVO4/2019” (EPI_ISL_402124) but on the basis of the CPEs they observed in three cell lines. However, these are illegitimate proxies for the postulated infection of a healthy (non-diseased) animal or host. The three cell lines employed were: Vero E6 (aneuploid) cells derived from the kidney of an African green monkey; Huh7, a human hepatocyte cell line taken from a liver tumour in 1982 and subsequently cultured; and human HeLa cells derived from a female human in 1951 suffering from cervical carcinoma and subsequently cultured. None of these cell lines meet the postulated criterion of a healthy host with which to test for pathogenicity, but are favoured as they produce the effects being sought, that is, CPEs and the appearance of extracellular vesicles. To the cell lines were added, among other items, inorganic salts, foetal bovine serum to feed the cells, and an array of cytotoxic items such as amphotericin B – an anti-fungal, trypsin – which hydrolyses protein, penicillin – an antibiotic, streptomycin – another antibiotic, glutaraldehyde – a disinfectant and fixative, and osmium tetroxide – an acutely toxic oxidising agent, and epoxy resin – to create a solid substrate for ultra-thin slicing. Bizarrely, on the basis that RNA of unknown provenance was part of the culture in which many cells died by way of induced starvation and stress with cytotoxic ingredients, the authors claimed that they had successfully isolated their virus, 2019-nCoV BetaCov, not that the cocktail of cytotoxic ingredients had decimated their abnormal cell lines.

In short, Peng Zhou et al. fulfilled none of the postulates to identify the virus or confirm it as being causative of any disease. The alleged virus had not even been physically isolated and purified for biochemical characterisation and hence remained entirely theoretical.

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36 Ibid., 272.
37 Ibid., Reporting Summary, unnumbered second page.
38 Ibid., “Methods” unnumbered first page.
This was apparently of no concern to the Bill and Melinda Gates Foundation, the foundation providing the Chinese Academy of Sciences, with which 24 of the 27 co-authors were affiliated, with a 2020 COVID-19-related grant under INV-006377 totalling US$359,820 for the following purpose: “To support developing assays platform of drug screening and subunit vaccines of coronavirus, which will contribute to product innovation of COVID-19 pandemic control”.  

Na Zhu et al.

Published in The New England Journal of Medicine on 20 February 2020, Na Zhu et al. describe their study of lower respiratory tract samples, including bronchoalveolar lavage fluid (BALF), collected from four patients with pneumonia of unknown cause, all of whom had visited the Huanan Seafood Market in Wuhan shortly before their clinical presentation.  

Despite claiming isolation of the virus, it is clear that the authors do not mean “isolation” in the dictionary and postulated sense but virology’s substituted antonymic meaning and the substitution of diseased for non-diseased host cells to establish causality between a purported virus and the patient’s illness. In this case, the supernatant centrifuged from patient BALF “was inoculated on human epithelial cells ... resected from patients undergoing surgery for lung cancer”, although purportedly pathogen-free. In any event, cancer cells would be present in such cells, and, as they are wont to do, such cells produce an abundance of exosomes, which would be visible by way of Transmission Electron Microscopy. Unlike Fan Wu et al. and Peng Zhou et al., Na Zhu et al. did produce images of what they described as “2019-nCoV particles” but without any verification of their biochemical composition from a purified

41 Ibid., 728, 730-31.
42 Ibid., 728.
43 Ibid., 731.
It is simply impossible to establish from the proffered images that the particles are viruses (i.e., infectious and disease causing) or that they contained the alleged SARS-CoV-2 genome.

Yet despite this double deception that haunts virology, virologists still cling to their beliefs and their jobs. For as Na Zhu et al. put it: “Although our study does not fulfil Koch’s postulates, our analyses provide evidence of implicating 2019-nCoV in the Wuhan outbreak.” The basis of this claim seems to be the authors placing arrowheads on extracellular vesicles of unknown composition and christening them “2019-nCoV”.

Implication and unknown composition, however, was good enough for the Bill and Melinda Gates Foundation, which provided the National Institute for Viral Disease Control and Prevention, with which 13 of the 18 co-authors were affiliated, with a 2020 COVID-19-related grant under INV-019121 for US$71,700 “to support China CDC to evaluate the quality of COVID-19 serological diagnostic reagents in China and provide evidence for scientific use of reagents in clinical diagnosis and epidemiological survey”.

Leon Caly et al.

Leon Caly et al. produced their own brand of antipodean nationalism under the title “Isolation and rapid sharing of the 2019 novel coronavirus (SARS-CoV-2) from the first patient diagnosed with COVID-19 in Australia” when they reported on a 58 year-old man from Wuhan who “felt unwell” when he arrived in Melbourne on 19 January 2020.

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44 Ibid.
When they claimed, the Vero cells “showed cytoplasmic membrane-bound vesicles containing coronavirus particles”, Caly et al. were unable to find “virions” with the purported spike protein, so they added more trypsin to the cell culture medium, and before they could say “Jack Robinson”, the trypsin, the function of which is to digest proteins, had gobbled up the outer protein layer of a 100 nm spherical “virion” to reveal “the characteristic crown-like fringe of spike proteins”, which, they added without the slightest hint of irony, “immediately improved virion morphology.” In other words, when the exosomes did not look like their desired virus, they gave it a little trypsinised encouragement. The alleged virions were not purified so their biochemical composition could not be established: the proffered “genome” was in fact put together after generating “approximately 30,000,000 reads” from the tissue culture mix. As per all other papers of this nature, no explanation was provided as to how these particles are known to cause disease or whether these very same particles exist inside humans. Again, they could only be called extracellular vesicles of unknown significance, produced from abnormal monkey kidney cells in a test tube. The additional problem of whether the electron micrograph images of prepared tissues in vitro even resembles that of living cells is beyond the scope of this essay.

Nothing further need be said about the follies of this paper and the virological nonsense that informs it, except to add that NZ’s Ministry of Health (MOH) states that this is one example “of the virus being isolated and cultured in a laboratory setting.”

**PART TWO**

**THE SECOND PILLAR: GENOMIC SEQUENCING**

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48 Ibid., 461-62.
The unfolding worldwide tragedy has in large part been enabled by the descent of science “—the systematic study of the nature and behaviour of the material and physical universe, based on observation, experiment, and measurement” — into scientism, the uncritical application of scientific methods to inappropriate fields of study”. 51 This has become a secularised system of belief that relies for its authority on its own performativity and the presupposition of phenomenological pre-existence in which assumptions and hypotheses are treated as conclusive and abstractions are treated as replications of the real.

The second pillar of the COVID-19 fraud is that of genomic sequencing.

The virologists claim that they have worked out the entire genetic structure of viruses such as “SARS-CoV-2” and upload this onto databanks, as Fan Wu, Peng Zhou, Na Zhu, Leon Caly and their teams did in early 2020, and as many have done since. Again, they claim that they have an “isolate” of the virus but this declaration is made after they have “constructed” the genome from their mixed brew containing genetic fragments of unknown provenance. In the case of Fan Wu et al., despite there being no bats for sale in the indoor seafood market where the patient worked, and despite the inventors being unable to confirm an intermediate host or reservoir for their virus, they chose, nevertheless, another in silico bat coronavirus as the template with which to create WH-Human 1 (SARS-CoV-2). 52 This, no doubt, is all part and parcel of virology’s need for scientific validation, expressed in its 20-year quest for bat El Dorado wherein, it imagines, lie all the coronavirus treasures of the world. 53 In the meantime, it keeps inventing viruses to feed Big Pharma to keep itself afloat.

The process virology uses to claim “isolation” can be summarised as follows. From the biological “soup” taken from patient’s lungs or nose swabs containing all sorts of material from the human subject, innumerable commensal microbes and potential contaminants, de novo assembly platforms search for short genetic fragments. After finding millions of unique fragments in the brew, these software programmes piece together a “genome” (one long piece) based on parameters set in the programme. Along the way there is a bit of cut-and-pasting and if pieces are “missing”, other ready-
made templates can be added to fill the gaps. However, the man-made algorithms, probability models and arbitrary selections cannot deliver the “yes” or “no” answer to the question of its physical existence in nature, not least because any coronavirus “genome” used as a template in its production will likewise be propositional, the methodology providing no confirmable connection with the material or physical universe, making the new member of the Coronavirus genus merely another product of virology’s sui-referential processes.

An analogy for these processes would be that you find a million cards on the floor, each with partial sentences. You start arranging them into full sentences and then eventually a story. If some bits don’t fit you discard them, and if bits seem to be missing you borrow a paragraph from another story. But how would you know that this was an existing story and not something you had just made up? And why could there not be ten smaller stories in there, or no story at all? In short, you cannot claim to know the story unless you have access to the complete story before you start. And herein lies virology’s deception – virologists do not work with a complete genome because they do not work with a complete virus. They work with random bits of biological material and then tell us that it constitutes evidence of a virus. However those of us that examine their experiments carefully can see that there’s a problem: there is no material proof of any virus.

Indeed, what the public is not told is that no virus called SARS-CoV-2 has ever been actually isolated and purified as a whole unique structure. What takes place is simply the shotgun sequencing of crude samples which contain genetic fragments of unknown provenance. Therefore, there is no evidence whatsoever, not even the vaguest guarantee, that the resulting in silico “genome” exists in nature or has anything to do with a “virus”. In this manner, however, the invention of the “virus” is presented as a discovery, its faux status retroactively secured through the act of denotation whereby its naming purports its prior existence and its pathogenicity.

That a notional hypothetical genome invented by such anti-science should lie at the heart of this assault on humanity is a scientific and ethical outrage. It is this false
science that has turned the world upside-down, providing opportunity for politicians to assume the role of needle Nazis. That is the insidiousness of virology’s crime, a generalised version of the false claim of isolation provides politicians with “permission” to state-rape those in the government’s employ, and to extend their systematic programme of bodily violation into the private sector, the latest victims being retail and hospitality workers.54 For the remainder, the crime steals into our consciousness under cover of duty and beneficence causing many of us to accept into our bodies the unknown contents of vials the government has apparently not bothered to check, produced by a manufacturer with a spectacular record of criminal medical fraud, contents, furthermore, that smuggle genetic vectors with poorly ascertained effects into our bodies, all for the greater good of protecting society from a deadly disease that does not exist.55

How a contemporary democracy could have fallen for such preposterous but deadly nonsense is beyond the scope of this essay. Suffice it to say, that this is why this New Zealand government is not “your single source of truth” but a criminal purveyor of monumental lies it uses as cover for its cowardly crimes against humanity, its acts of terror and democide, and the widespread socioeconomic carnage and dislocation it continues to inflict on the people of this whenua, replicating circumstances prior to the establishment of the totalitarian regimes of the twentieth century.

THE THIRD PILLAR: PCR

The third pillar of the COVID-19 fraud concerns the misapplication of the PCR (modified as RT-PCR, reverse-transcriptase-PCR in order to detect single-stranded RNA because the PCR can only reliably amplify DNA). This misapplication centres on the amplification of RNA sequences taken from human subjects said to belong to

SARS-CoV-2 and also a disease termed COVID-19. However, the PCR cannot confirm either of these things; its capability is solely confined to the amplification of the selected nucleotide sequences, not to determining their provenance or significance. This fraud, then, relies on the attribution of meaning to the amplified sequences, which is supplied by: (a) reference to the imaginary in silico genome and not to a proven physical entity called SARS-CoV-2; and (b) a “disease” that with absurd circular reasoning has been defined by the PCR result itself. SARS-CoV-2 has never been located in a human subject, isolated, purified and subsequently photographed and biochemically characterised as a whole unique structure. It has not been proven to exist in nature; in fact, key component parts were patented in 2007 which, by definition, would require them to be man-made. With regards to the short nucleotide sequences being detected by the PCR kits in use, they exist but come from somewhere else, not from a virus labelled “SARS-CoV-2”. (If it is done poorly or at high cycle numbers, as has been typical, the target sequence may not even exist in the sample and a “positive” result is simply an artefact of the process.) Furthermore, the PCR cannot diagnose the infectious status of a human in any proven way and no consistent link has ever been found between a disease state and the PCR results. In short, the misapplication of the PCR means that COVID-19 is a scientifically meaningless construct that represents nothing more than a referential illusion.

From the outset, the purpose of this misapplication was to provide the statistical basis for a pandemic based on a disease invented by the WHO for the benefit of elites and selected members of the pharmaceutical industry, not for humankind. As at 3 January 2020, with only “44 case-patients with pneumonia of unknown etiology”, there was no basis to prime the start button for the pandemic the WHO and the pharmaceutical industry were desperately seeking; Moderna and BioNTech, Pfizer’s partner, for instance, had lost almost $1 billion between them in 2.5 financial years between 2016

and 2019.57

However, following publication on the WHO’s website on 13 and 17 January 2020 of non-peer reviewed PCR assay sequences designed by Christian Drosten et al. to detect the purported virus, assays designed, as the authors acknowledged, “without having virus material available”, COVID-19 case number began to grow.58


Between 22 and 24 January, the WHO convened an emergency meeting to monitor the international situation despite there being only 17 deaths and 581 cases reported at that stage. This lack of cases posed a problem for pharmaceutical companies wanting to get their highly experimental genetic encoding devices, disguised as vaccines, onto the market without having to go through the normal approval processes, which they doubted they could pass. A public health emergency could be the means to bypass the stringent licensing conditions of regulatory authorities. By now the RT-PCR “tests” were in overdrive, producing enough cases for Tedros to declare “a public health emergency of international concern” (PHEIC), and to stoke the rhetoric: “This is the time for facts, not fear. This is the time for science, not rumours. This is the time for solidarity not stigma.” For in just seven days from 24 January, COVID-19 case numbers had risen worldwide by 1,245.61%, from 581 to 7,818, although only 98 of those were outside China. By the next day, total case numbers had increased to 9,826. Here was the international fraud in full view, astronomical growth of a phantom virus that had not been isolated let alone shown to be causative of any disease, with Tedros recommending as even more important than the “public health emergency of international concern” accelerating “the development of vaccines, therapeutics and diagnostics”.

60 Moderna, Inc., “United States Securities and Exchange Commission, Form F-1 Registration Statement” (9 Nov 2018), 12.
64 Ibid.
65 “WHO Director-General’s statement on IHR Emergency Committee on Novel Coronavirus (2019-nCoV)”, WHO (30 Jan 20), 3.

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The stench of fraud was everywhere. Drosten failed to declare that he was a member of the *Eurosurveillance* editorial board when he and his co-authors were published in *Eurosurveillance* on 23 January, two days after submission.\(^66\) It also emerged that Drosten would “likely face court charges for holding a fraudulent doctoral title.”\(^67\) Another co-author, Chantal Reusken, also failed to declare that she was on the *Eurosurveillance* editorial board, and yet another of Drosten’s co-authors, Olfert Landt, CEO of TIB Molbiol, failed to declare his conflict of interest until 29 July 2020 that his company was the maker of a PCR kit based on the published assay sequences.\(^68\) For Landt, the deception paid off handsomely, as his company would later report: “TIB Molbiol … has been supplying COVID-19 PCR test kits since early January 2020. Over the last 12 months we have delivered over 60 million tests.”\(^69\)

Suddenly the world was immersed not in a viral pandemic but a PCR pandemic generating fear around the world. But fear both pays and pays well. The institution with which this paper’s most prominent creators were associated, the university hospital of Charité Berlin, received a 2020 grant from the BMGF under INV-005971 “to develop diagnostics and virology tools to enable a rapid response to the novel 2019 coronavirus” totalling US$249,550.\(^70\)

The PCR pandemic has now sustained the phantom COVID-19 pandemic for almost two years. While it is claimed that the PCR can detect a virus and an infection, that is just more deception. The PCR method simply amplifies genetic fragments, that’s it. As we have established, no one has a physically isolated specimen or even proven the existence of the virus. That is why the Drosten PCR assay sequences were designed without a virus, as were assay sequences for the US Centers for Disease Control and

\(^{69}\) “RT-PCR test kits and VirSNIP Mutation Assays for strain surveillance”, TIB Molbiol (accessed 6 May 20): [https://www.tib-molbiol.de/covid-19](https://www.tib-molbiol.de/covid-19)
\(^{70}\) Bill and Melinda Gates Foundation (accessed 7 May 2021).
Protection. In other words, the PCR has been calibrated to detect genetic sequences of a “virus” that has not been shown to exist in nature. Instead, it is detecting sequences of unknown provenance that are found in some humans and reportedly in some goats, a quail, and jackfruit too. As Kary Mullis, the Nobel Prize winning inventor of the PCR pointed out, the PCR “doesn’t tell you that you are sick, or that the thing that you ended up with was going to hurt you or anything like that.” Indeed, despite purporting to be a "diagnostic workflow for 2019-nCoV", the Drosten paper simply described the analytical sensitivity and specificity of their PCR protocol to amplify the selected nucleotide sequences, it did not establish any diagnostic specificity for any clinical condition. Hence, despite health authorities claiming that the PCR is suitable for diagnosing COVID-19, an Austrian court in March 2021 confirmed the contrary, its ruling echoing Mullis: “a PCR test is not suitable for diagnosis and therefore does not in itself say anything about the disease or infection of a person.”

The complementary partner in the PCR crime is the WHO’S definition of a “COVID-19” case. Essentially, a confirmed case can be and most likely will be “a person with a positive Nucleic Acid Amplification Test (NAAT)”, that is, a PCR test, regardless of whether the person is unwell or not. This has created a preposterous situation where a “COVID-19” case is nothing more than the PCR result from a test that is not a test

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73 David James, “PCR Inventor: “It doesn’t tell you that you are sick”, OffGuardian (5 Oct 20): https://off-guardian.org/2020/10/05/pcr-inventor-it-doesnt-tell-you-that-you-are-sick/
75 “Austrian Court Rules PCR Test Not Suitable For COVID-19 Diagnosis And That Lockdowns Has No Legal Basis”, GreatGameIndia (8 Apr 21): https://greatgameindia.com/austria-court-pcr-test/
77 Ibid.
because the PCR has no diagnostic capability whatsoever in this regard as it is simply an amplification tool. The “positive” PCR tests are then posted by organisations such as John Hopkins University and Medicine that display meaningless statistics as though they were legitimate. In other words, not one of the 243,554,336 COVID-19 cases displayed on the Johns Hopkins ‘blood-splattered coronavirus dashboard as at 25 October 2021 exists outside of the viciously circular discourse that relies solely on the dual unproven premise that SARS-CoV-2 has been isolated and is causative of COVID-19.

As a consequence, we are now experiencing a medical tyranny, disconnected from the natural world and so absurd that the detection of a few genetic fragments in one person can be used as the excuse to lock up an entire nation.

THE FOURTH PILLAR: OUTBREAK MODELLING

The astronomical case numbers produced by the PCR method became the basis of the reproduction number (R₀) that initialised all COVID-19 outbreak models. Yet even relying on these worthless numbers, outbreak modelling, long notorious for its predictive fallibility, still managed to produce predictions that were spectacularly preposterous.

The most prominent purveyor of this speculative nonsense was Neil Ferguson of Imperial College London (ICL), lead author of ICL’s Report 9, published without peer review on 16 March 2021, which predicted that 550,000 people in the UK and 2.2 million people in the US would die within approximately three months without non-pharmacological interventions. Its dire predictions caused governments to change horses mid-stream and predictably caused widespread panic amongst an unsuspecting public, creating an environment of fear and a willingness to comply with

79 Neil M Ferguson et al., “Impact of non-pharmaceutical interventions (NPIs) to reduce COVID-19 mortality and healthcare demand”, Imperial College London (16 Mar 20), 6, 7, 13: DOI: https://doi.org/10.25561/77482
public “health” policies in many countries. When he eventually released Report 9’s programming for public scrutiny, Ferguson found it ridiculed by commercial and academic experts alike. One commercial expert thought it a “buggy mess that looks more like a bowl of angel hair pasta than a finely tuned piece of programming”, while scientists at the University of Edinburgh reported that it failed “the basic scientific test of producing the same results given the same initial set of parameters”. 80 Ten days later, Ferguson, who believes models are “simplified versions of reality”, predicted, in another co-authored paper from ICL, that 40 million people could die worldwide from COVID-19. 81

Modelling mayhem in NZ was largely the domain of three groups. First to publish was the government’s commissioned modellers, the University of Otago Wellington COVID-19 Response Group (UOWCRG), with a report dated 27 February 2020 in which the modellers “estimate[d] likely deaths to be between 12,600 and 33,600”, the latter at 0.67% of the NZ population equating to over 52 million deaths worldwide. 82 Having conducted no due diligence into the originating circumstances of SARS-CoV-2, yet having collected miscellaneous information about it from hither and yon – “Quardle oodle ardle wardle doodle” – including their reproductive (R0) numbers from four different sources and infected case numbers from Australia, UOWCRG predicted that the country’s hospital system would be overrun with “336,000 people” requiring “hospitalisation”, and between 67,000 and 79,000 patients requiring intensive care units in their “worst case” scenario. 83


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However, the phantasmagoria of mass death on which the state of exception was decided relied not on the government’s commissioned modellers but on two uncommissioned, non-peer reviewed modelling reports, the eight authors of which, four to each report, had no qualifications in epidemiology or any prior experience in modelling a human epidemic. Their astronomical predictions were not the product of scientific rigour but of algorithmic speculation based on case numbers from the MOH for one report, and for the other, on “comparisons with international data on case trajectories and modelling studies for the UK and US outbreaks (Ferguson et al 2020)” in order to calibrate their “reproduction number with control (R∗).”84 The first of these reports was from Wigram Capital Advisors, a small macroeconomics advisory firm specialising in China and Asia.85 The other, Te Pūnaha Matatini (TPM), which describes itself as a “Centre of Research Excellence for Complex Systems”, is attached to the University of Auckland.86 Wigram’s models were “run around 22 March” and predicted 4,000 COVID-19 cases by 3 April and 10,000 by 9 April.87 It was Wigram’s modelling to which the government referred on 23 March when it claimed: “If community transmission takes off the number of cases will double every five days.”88 Suffice it to say, had COVID-19 cases doubled every five days and had community transmission begun on 24 March without lockdown the following day, the then-155 confirmed cases would have infected the entire population of NZ by 7 June 2020.89 Had Australia had the same number of cases on the same day doubling every five days, its 25.5 million population would have been infected by the middle of June, and, on the same basis, the world’s population of 7.8 billion would have been infected by the end of July 2020.

TPM’s lead author made his dramatic intervention on Sunday, 22 March, by going to the media with the alarming claim that his provisional modelling, produced on his kitchen table, suggested that 60,000 would die unless “an aggressive suppression strategy” was implemented “as soon as practicable”, which, miraculously, would save 50,000 of those lives.90 It was all rough-and-ready, the modellers having no precedent to refer to regarding the effects of such a strategy but more importantly, having no idea if the virus even existed. As the lead author admitted, these results had been produced with “a lot of guesswork” relying on overseas data, while the modelling itself, treated “New Zealand as one big city where anyone has the chance of infecting anyone else”, a fundamental error that contributed to the report’s preposterous fatality predictions.91 By the next morning, TPM’s 60,000 had risen to 1.67% of the population or 83,500 who could die without any public “health” intervention measures, a fantastical story with no basis in reality but one that had parliamentarians shaking in their boots and that the wizards still believe one year later.92 Extrapolated to the world’s population, TPM’s Ministry of Self-Promotion had just predicted that 130,260,000 would die worldwide.

The small TPM group were richly rewarded by the government with a $6 million dollar prize for helping them promote a nonsensical narrative and drive baseless fear into the population of New Zealand.93

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If TPM were the winners of the prize for the most risible prediction, Neil Ferguson’s ICL was the winner overall. Gates, who appreciates a scary story that confirms his “predictions”, shuts down much of the world, and decides that only “vaccines” can reopen it, dug deep for his ICL brother-in-arms, pulling out of his back pocket a roll of grants for 2020 totalling US$91,494,791. Among those grants were INV-016635 totalling US$1,080,771 “to evaluate the potential efficacy of a Ribonucleic acid (RNA) vaccine against COVID-19”, INV-023013 totalling US$140,041 “to model the potential impact of rapid diagnostics for COVID-19”, and INV-023210 totalling US$ 1,487,605 “to understand how the social and other indirect impacts of COVID-19 (social distancing, quarantine, etc) and perceptions of risk impact sexual risk behaviour that could lead to HIV”. While 2020 was a bumper year for ICL, Gates had long been grooming ICL, the Bill and Melinda Gates Foundation having provided it with grants since 2002 totalling US$302,164,640, or around US$16,000,000 per year for the last 19 years.

While confusion and debate rages over these models, why the “virus” behaves so differently in different places, whether there is excess mortality, and whether the “vaccines” are effective, it is all a distraction. If one examines Fan Wu et al.’s origin paper and all those that have followed, the truth is that “SARS-CoV-2” has not been shown to exist. There is no such thing as “COVID-19” outside of a malevolent narrative foisted onto mankind.

**PART THREE**

**IN SUMMARY**

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95 Ibid.
96 Ibid.
• The COVID-19 fraud is the work of international elites, the pharmaceutical industry, and complicit politicians working to a globalist agenda, the purpose of which appears to be the extinguishing of human rights and freedoms and the dismantling of democracy for purposes of controlling populations and the extortion of vast sums of money from countries on the basis that a disease, COVID-19, invented by the WHO, poses a serious threat to their populations.

• Foundational to this agenda is the fraud that a novel coronavirus called SARS-CoV-2 has been found in and isolated from human subjects and shown to be causative of a disease called COVID-19. None of this has happened.

• The proposed remedy for this supposed killer virus is a spike protein produced by a genetic sequence that is not found in nature but in a US patent from 2007. The “vaccines” based on this sequence have killed many thousands of people around the world and maimed and injured millions more.

• The statistical basis of this phantom pandemic has been determined by the misapplication of a PCR method that has no established diagnostic (clinical) specificity. It has not diagnosed a single case of a novel illness and has only produced meaningless “COVID-19” case numbers.

• Accordingly, the New Zealand Government is complicit in the worldwide COVID-19 fraud and thereby stands accused of reckless criminality, including human rights abuses, crimes against humanity, democide, acts of terror and mass murder.

CONCLUSION

Since the Epidemic Preparedness (COVID-19) Notice 2020 came into force on 25 March 2020, we have been living in the state of exception, which may be described as a liminal space between law and life where the law no longer applies and where pure
force appropriates lawlessness unto itself in order to make itself the law. Of course, in a kind of “no-man’s land between public law and political fact”, the state of exception “is not a dictatorship (whether constitutional or unconstitutional, commissarial or sovereign) but a space devoid of law, a zone of anomy in which all legal determinations—and above all the very distinction between public and private—are deactivated.” Our homes as prisons, our bodies no longer inviolate, the mark of the needle, like the Star of David, the determiner of who is included and who is excluded, all embody the state of exception and may be considered harbingers of what lies ahead.

In closing, we hope that this essay might both encourage and help you to prepare for what lies ahead. For in this current climate, in this state of political entrapment, circumstances will only continue to deteriorate unless we rise up peacefully en masse to claim back what we have now learned is so easy to lose – democracy, the rule of law, and human rights and freedoms bequeathed over many hundreds of years but stolen by this government in less than two, all on the basis of an imbecilic fraud that nonetheless has terrorised and divided the people of New Zealand to the point of dysfunction, dividing families and friends, lovers, soul mates, colleagues and best mates. Unless we turn out of office by all peaceful and lawful means this iniquitous government and we the people as the People govern ourselves in a form of dispersed, direct and inclusive democracy uniquely adapted to the circumstances of this place so that we can live ethical lives in harmony with each other, we will continue to be held in the chains of terror in which more and more of us will be state- raped, injured and die from the poison being injected into our bodies to combat a disease that does not exist.

The essay also hopes to encourage further investigation into the legitimacy of the methodologies being employed by the establishment virologists, as well as the misapplication of the PCR in clinical diagnostics. If these anti-science methods

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continue to be widely accepted we are likely to see even more baseless “pandemics”, requiring even more “vaccines”, continuing indefinitely as part of the “new normal”. In fact, one manufacturer is already indicating its plans “to develop an mRNA combination vaccine ‘so that people can get one shot each fall for high efficacy protection against the most problematic respiratory viruses’”. 99 There is nothing normal about the pharmaceutical industry and globalist organisations creating demand for unnecessary gene therapies through fear and the creation of pseudo-pandemics. There is nothing normal with regards to the unprecedented censorship of scientific debate and the prevention of medical practitioners providing advice to members of their communities to help them decide whether or not they wish to give informed consent to participate in the current population-wide medical experimentations. Indeed, medical ethics require medical practitioners to do just that. Only the most naïve would believe that in the current contrived environment, a cabal of elites and an industry with an appalling record of injuring and killing people are making the world a healthier place for its inhabitants.

Tyrannies come and go. This one, in its ascendancy, is already choking on the chicken bone of its own hubris. The scientific and ideological façades that this scam relies on will bring about its own fall and with its collapse a new dawning for us all to inherit. Closet tyrants, when they eventually emerge, are always naked, empty vessels full of other people’s ideas, waging war on the innocent to hide from what they lack. They have not yet learned that control is a dead-end street or that that which sets the human spirit soaring is nothing more than acceptance.

POSTSCRIPT

As part of the process of peacefully taking back that which belongs to the people of NZ, Heterodoxies Society Incorporated filed a proceeding on 6 August 2021 in the Auckland High Court, CIV-2021-4041599. Regretfully, since then, on the basis of a legal

contrivance that has no apparent statutory basis or value to the law, the case has been stayed, that is, confined to the equivalent of legal quarantine. Here is part of what the Court has recently refused to hear.

CRIMES AGAINST HUMANITY

“This was an intentional bio-weaponisation of spike proteins to inject into people to get them addicted to a ‘pancoronavirus’ vaccine. This has nothing to do with a pathogen that was released...This is about getting people injected with a known to be harmful S1 spike protein...The tragedy is we are in a world where we have hundreds of millions of people being injected with a pathogen-stimulating computer sequence...which is being sold under what the patent office, what the medical profession, and what the FDA and its own Clinical Standards would not suggest is a vaccine, but by using the term we actually are now subjecting hundreds of millions of people to what was known to be, by 2005, a biological weapon.”

Dr David Martin, 12 July 2021

On 20 September 2021, a press conference was held at the Institute of Pathology in Reutlingen, Germany in order to present in Part One, “Cause of Death after Covid-19 Vaccination”, the findings of pathologists Arne Burkhardt and Walter Lang who had investigated ten deaths of persons over 50 who had died in temporal context of being administered so-called COVID-19 vaccines, including Comirnaty from Pfizer. In Part Two, “Undeclared Components of Covid-19 Vaccines”, non-biological items found in the vials of these products were presented and discussed by various participants, including physicians across and outside of Germany.

Professor Dr Burkhardt taught for many years at the universities Hamburg, Bern and Tübingen, as well as visiting professorships/study visits to a number of universities around the world. He headed the Institute of Pathology in Reutlingen for 18 years, after which he worked as a practising pathologist. He has published over 150 articles in specialist journals. Professor Dr Walter Lang worked as a pathologist at Hanover Medical School from 1968 to 1985, then founded a private institute for pathology in Hanover where he worked for 25 years. From 1985 to 2020, he conducted

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100 Evidence of Dr David Martin, “CDC Fraud”, Hearing of the German Corona Extra-Parliamentary Inquiry Committee (12 Jul 21): https://www.bitchute.com/video/yf4HNBenoWcN/

consultation examinations for the pathology of the lung clinic in Herner. They were accompanied in this presentation by Professor Dr Werner Bergholz, a former professor of electrical engineering with a focus on quality and risk management at Jacobs University Bremen, who had worked for 17 years in the management of chip production at Siemens prior to that appointment.102

Of the ten decedents who had undergone post mortem examination, Burkhardt and Lang, relying on tissue material obtained from the forensic pathologists who had first examined the cases, formed the view that five of the deaths were very likely related to the COVID-19 “vaccines”, two probably so, one was unclear and they considered that two had no causal relationship.103 “In three cases, they found rare autoimmune diseases; one of them so rare that they only discovered it when they looked closely at the digitized image. They were Hashimoto’s, an autoimmune-triggered hypothyroidism; leukoclastic vasculitis, an inflammatory reaction in the capillaries that leads to skin bleeding; and Sjögren's syndrome, an inflammation of the salivary and lacrimal glands.”104 There were a wide range of observed diseases, some common, some rare. To find these in a collective of ten patients was “very extreme”, Burkhardt said.105 As he put it: “We are looking at an immune system that overshoots completely, self-to-self attacking, and the inflammation is taking place in every organ, in every vessel ... and this leads to strong autoimmune reaction and diseases. These are diseases, I would say, that are one to 100,000 normally.”106

According to the pathologists, lymphocytes had flooded in and caused massive cell destruction. They showed images of “accumulations of lymphocytes in a wide variety of tissues, from the heart muscle to the kidney, liver, spleen, and uterus”, and also “images in which the tissue was massively attacked as a result, and a whole series of

102 Ibid.
104 Ibid.
105 Ibid., 27:45 on.
106 Ibid., 53:00
lymphocyte follicles ... in completely the wrong place, for example in lung tissue.” 107

They “also showed detachments of endothelial cells – which are the smooth cells that form the wall of blood vessels – clumps of red blood cells that ultimately cause thrombosis, and giant cells that [had] formed around trapped foreign bodies.” 108

Burkhardt described it as follows in this paraphrased summary of his overall findings:

“I thought a lot about what I saw and I could see only one thing, which is lymphocytes run amok (gone berserk) in all organs and all tissues. We are witnessing an extreme immune reaction, a self-to-self attack (triggered by the vaccine). I witnessed hyperplasia (overgrowth) and the activation of lymphatic organs, lymph nodes, and spleen, and lymphocyte infiltration in non-lymphatic organs. As a result (of this lymphocytic storm), we see the loss of external immune capacity and function combined with lymphocyte-caused tissue inflammation and destruction, with the risk of a prolonged auto-immune reaction. Nobody can say whether or how long it will take these tissues to regenerate and be restored to their normal, healthy state.” 109

The following are representative slides prepared and presented by Dr Burkhardt during the press conference:

108 Ibid., 2.
Figure 2. Caption for Case 7: This is a higher resolution image of a lymph follicle in pulmonary alveolar tissue. We also see these lymph follicles around lung blood vessels. This is clear evidence of alveolar damage (in the lungs). What’s going on, here, is that one’s immune apparatus is attacking one’s own tissues. Thus, the vaccines are triggering auto-immune diseases which may not show up for some years. The massive infiltration of lymphocytes in brain, heart, lung, and kidney tissue is a red flag for both auto-immune disease and cancer. Expect to see cancer rates go up substantially in the years to come.”

Figure 3. Caption for Case 2: This slide shows lung tissue blood vessels with erythrocyte (red blood cell) clumping.”
In Part 2, a wide range of images of foreign bodies found in the manufactures’ vials were photographed and their movements recorded by video. According to the presenters, none of these objects has ever been found in traditional vaccines and should not be inside human bodies. Their shapes ranged from SIM-card lookalikes to long-beaded filaments and large rock-like shapes. They appear to be metallic structures. None of the experts knew what they were for. “Neither Dr Burkhardt nor Dr Lang had ever seen these objects in their many decades of experience”, yet “these non-biological materials have evidently “been injected into hundreds of millions of people.”110

As Holger Fischer, a German attorney and panel member, opined, “we do not have to have the burden of proof. If you had a lemonade with this sort of contamination it would be off the market immediately.”111 Maria Hubmer-Mogg, a physician from Austria, concurred. “These vaccinations need to removed immediately and their emergency use revoked.”112 Referring to the narrative of fear, she added, “people

110 Dr Burkhardt, “Slideshow presentation”, Dr Arne Burkhardt, Dr Walter Lang, Dr Werner Bergholz, “Cause of death after Covid-19 vaccination”, Press Conference, Institute of Pathology, Reutlingen, Germany, (20 Sep 21); Ibid., 1:53:
112 Ibid.
now want to vaccinate their children, even their toddlers. This is something unimaginable, this is pure madness, and this madness must be stopped immediately.”

After over two-and-a-half hours, Fischer brought the press conference to a close with the following statement: “One thing is clear, whoever carries on with the knowledge as of today is legally punishable; they cannot say that they did not do this deliberately or at least partly deliberately. And this is a crime against humanity that is called “deletion of human beings”, and the parties are deleting their electorate here ... Many people don’t know how sick they are. Many may be finding out tonight [that they need] to get help ... We want to save what can be saved from those who are already vaccinated.”

The following are selected images as presented at the conference of numerous non-biological objects found in the vials of these products. These alone should be sufficient to bring an immediate halt to the criminal rollout of Comirnaty in NZ.

Figure 5. Caption: The rest of the slides show non-biological, foreign bodies found in the vaccines. These non-biological materials evidently were injected into hundreds of millions of people. (Several of the slides were furnished by other physicians in Germany or Austria.) Neither Dr Burkhardt nor Dr Lang had ever seen these objects in their many decades of experience.”

113 Ibid.
114 Ibid., 2:34:30.
Figure 6. Caption: UFOs found in vaccines.

Figure 7. Caption: (Looks like a cellphone to me!)
Figure 8. Caption: Salamander?"

Figure 9. Caption: A UFO in the vaccine fluid.” Dr Burkhardt states that he saw hundreds of these in cells but this image is of “a highly magnified droplet of vaccine fluid using dark-field microscopy.”
Figure 10. Caption: Another beaded filament."

Figure 11. Caption: Burkhardt notes the rows of blue objects on the larger blob. He wonders if these are nano-chips of some sort. "This shows the non-biological foreign object in vaccine fluid."
Figure 12. Caption: “Burkhardt wonders if this too is a graphene chip.” Is this “carrying who-knows-what information to the protein-manufacturing apparatus in the cells.”

THE FINAL INSULT

While the deal Pfizer has made with the NZ government remains hidden from the public’s eye, and while the contents of the Pfizer vials remain hidden from a government blind to its own perfidy, a leaked Pfizer manufacturing and supply contract with Albania opens a window onto the nefarious world in which this pharmaceutical giant wields power over and extorts money from nation-states on the basis of the COVID-19 fraud. This contract, signed by three Albanian officials, has made their government party to the fact that “the long-term effects and efficacy of the Vaccine are not currently known and that there may be adverse effects of the Vaccine that are not currently known.”

Yet Pfizer’s vast profits, being raked in at US$12 per vial according to this contract, are guaranteed even if a trail of death and injuries are left behind for which the purchasing government must “indemnify, defend and hold

harmless Pfizer ... from and against any and all suits, claims, actions, demands, losses, damages, liabilities, settlements, penalties, fines, costs and expenses ... arising out of, relating to, or resulting from the Vaccine.”\textsuperscript{116}

Is this the same sort of arrangement to which the NZ Minister of Finance agreed when he granted Pfizer-BioNTech immunity from prosecution on 5 October 2020, an arrangement required to be notified to the House because the indemnity exceeds $10 million?\textsuperscript{117} If it is, then the NZ government is also party to a despicable contract, to be hidden from the public for ten years, to purchase a product that it knows and accepts is “subject to significant risks and uncertainties ... [and] may not be successful” but which it has incessantly promoted as “safe and effective”, has mandated for large sections of the workforce, and is insisting that its poison-making sequence and undeclared foreign objects be plunged into the bodies of our children.”\textsuperscript{118}

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\textsuperscript{116} Ibid., Attachment B – Delivery Schedule and Price, 22 (8.1).
\textsuperscript{118} Manufacturing and Supply Agreement By and Among Pfizer Export B.V., Albania Ministry of Health and Social Protection, Minister of State for Reconstruction and Institute of Public Health”, Pfizer Draft 1.6.2021 Confidential (1 Jun 21), 7 (2.1 [b]-[c]); “Dr Ashley Bloomfield and MedSafe’s Chris James talk about vaccine approvals”, Ministry of Health (4 Feb 21): https://www.youtube.com/watch?v=th4U_9Ddk4s